

Supplemental Application Data Sheet**Application Information**

Application number:: 10/726207
Filing Date:: 12/01/03
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 2811
CD-ROM or CD-R?: None
Sequence submission?: None
Computer Readable Form (CRF)?:: No
Title:: ACTIVE MATRIX THIN FILM TRANSISTOR
ARRAY BACKPLANE

Attorney Docket Number:: VTW-010DV2
Request for Early Publication?: No
Request for Non-Publication?: No
Total Drawing Sheets:: 16
Small Entity?: Yes
Petition included?: No
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Charles
Family Name:: FORBES
City of Residence:: Edgewater
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 218 The Promenade
City of mailing address:: Edgewater

State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07020-2107

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alexander
Family Name:: GELBMAN
City of Residence:: West Orange
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 158 Clarken Drive
City of mailing address:: West Orange
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07052

Applicant Authority Type:: Inventor
Status:: Full Capacity
Given Name:: Helena
Family Name:: GLESKOVA
City of Residence:: Princeton
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 42 McComb Road
City of mailing address:: Princeton
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 08540

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christopher

Family Name:: TURNER
City of Residence:: Belmont
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 11 Becket Road
City of mailing address:: Belmont
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02478

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Sigurd
Middle Name:: Richard
Family Name:: WAGNER
City of Residence:: Princeton
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 16 Maclean Road
City of mailing address:: Princeton
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 08540

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 00959

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	10/300514	11/20/02
<u>10/300514</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/350584</u>	<u>11/21/01</u>
<u>10/300514</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/333838</u>	<u>11/28/01</u>
<u>10/300514</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/374131</u>	<u>04/19/02</u>
<u>10/300514</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/382314</u>	<u>05/21/02</u>